U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Nor Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE \$770,0 (37 CFR 1.16(a)) OR TOTAL CLAIMS x \$9.00 x \$18.P= (37 CFR 1.16(c)) minus 20 = OR INDEPENDENT CLAIMS × \$ 86.0= (37 CFR 1.16(b)) mlnus 3 OR + \$296,= MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR * If the difference in column 1 is less than zero, enter "0" in column 2. OR TOTAL TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 3) (Column 1) (Column 2) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST 1 PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-AMENDMENT AFTER PREVIOUSLY EXTRA TIONAL TIONAL MEMDMEN. PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus OR Independent (37 CFR 1.16(b)) Minus x \$ 86 = ÓR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 2) (Column 3) (Column 1) CLAIMS HIGHEST α PRESENT RATE REMAINING NUMBER RATE ADDI-ADDI-**EXTRA** TIONAL AFTER **PREVIOUSLY** TIONAL FEE AMENDMENT PAID FOR FEE AMENDME Total (37 CFR 1.16(c)) Minus 00 OR Minus x \$ 86 OR \$400. FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL. ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) HIGHEST CLAIMS \bigcirc PRESENT RATE ADDI-RATE ADDI-REMAINING NUMBER **EXTRA** PREVIOUSLY TIONAL TIONAL AFTER FEE AMENDMENT PAID FOR FEE AMENDME Total (37 CFR 1.16(c)) Minus ÓR Minus Independent (37 CFR 1.16(b)) OR s290. FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the entry in column 1 is less than the entry in column 2, while 2 in to large 1 if the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 1996 **CLAIMS AS FILED - PART I** OTHER THAN SMALL ENTITY (Column 1) SMALL ENTITY OR (Column 2) FOR **NUMBER FILED NUMBER EXTRA** RATE FEE RATE FEE **BASIC FEE** 385.00 770.00 OR **TOTAL CLAIMS** minus 20 x\$11=x\$22= OR 3 minus 3 INDEPENDENT CLAIMS x40 =x80 =OR MULTIPLE DEPENDENT CLAIM PRESENT +130= +260= OR If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL TOTAL OR **CLAIMS AS AMENDED - PART II** OTHER THAN (Column 1) (Column 3) OR (Column 2) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER PRESENT ADDI-ADDI-RATE TIONAL **AFTER PREVIOUSLY EXTRA** RATE TIONAL AMENDMENT FFF FEE PAID FOR ENOM Total Minus x\$11=x\$22= OR X40= Independent Minus OR x80 =FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= /OR +260= TOTAL TC FAL OR ADDIT. FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING PRESENT $\mathbf{\omega}$ NUMBER RATE TIONAL RATE TIONAL AFTER **PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR MOZ Total Minus x\$11= OR x\$22= ũ Independent Minus x40 =OR x80 ≈ SA FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= OR +260= TOTAL TO AM OR ADDIT. FEE ADDITLE JE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING **PRESENT** NUMBER **AFTER** RATE TIONAL DATE TIONAL **PREVIOUSLY EXTRA** AMENDMENT FEE FEE AMENDMENT PAID FOR Total Minus X 7 x\$11=OR = independent x38= 10 CO P OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM -130= OR 420 "If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

Application or Docket Number